

**Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions**

A Public Document

1. Agency Name <u>School John Muir Middle School</u> Division, Department, or Region (If Applicable) <u>Melissa Urbain/Jeanette Harding</u> Designated Agency Contact (Name, Title) <u>Teacher/Principal</u> Area Code/Phone Number <u>408-535-6281</u> E-mail <u>Murbain@sjusd.org</u> <u>JHarding@sjusd.org</u>		<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> RECEIVED Date Stamp <u>maile ET</u> 2016 JAN 12 AM 10:24 </div> <div style="border: 1px solid black; padding: 5px;"> California Form 802 For Official Use Only </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ (Month, Day, Year) </div>
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2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 50

Event Description Hockey Date(s) 1, 6, 16 1, 6, 16
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐ If no: SJAA
Name of Source

Was ticket distribution made at the behest of agency official? No ☒ Yes ☐ If yes: _____
Official's Name (Last, First)

3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
<u>Teachers / Staff</u>	<u>24</u>	<u>- Recognition / acknowledgment</u>
B. Name of Individual <small>(Last, First)</small>	Number of Ticket(s)/Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization <small>(include address and description)</small>	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

<u>Murbain</u> <small>Signature of Agency Head or Designee</small>	<u>Melissa Urbain</u> <small>Print Name</small>	<u>Teacher</u> <small>Title</small>	<u>1/6/16</u> <small>(Month, Day, Year)</small>
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